

ATTACHMENT C

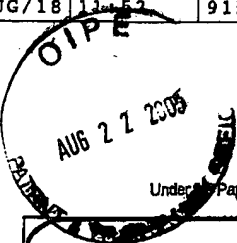
TRANSACTION REPORT

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	08/944,695	
		Filing Date	August 31, 2001	
		First Named Inventor	Sridhar Dathathraya	
		Art Unit	2135	
Total Number of Pages in This Submission		3	Attorney Docket Number	SLA1055

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Sharp Laboratories of America		
Signature			
Printed Name	David C. Ripma, Patent Counsel		
Date	August 18, 2005	Reg. No.	27,672

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Typed or printed name	Kimberly Mullen	Date	August 18, 2005

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PTO/SB/21 (09-04)

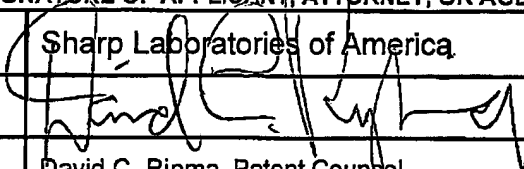
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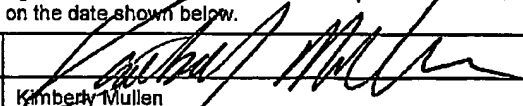
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/944,695
		Filing Date	August 31, 2001
		First Named Inventor	Sridhar Dathathraya
		Art Unit	2135
		Examiner Name	Leynna A. Ha
Total Number of Pages in This Submission	3	Attorney Docket Number	SLA1055

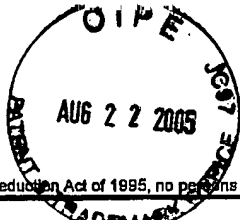
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Sharp Laboratories of America		
Signature			
Printed Name	David C. Ripma, Patent Counsel		
Date	August 18, 2005	Reg. No.	27,672

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Signature			
Typed or printed name	Kimberly Mullen	Date	August 18, 2005

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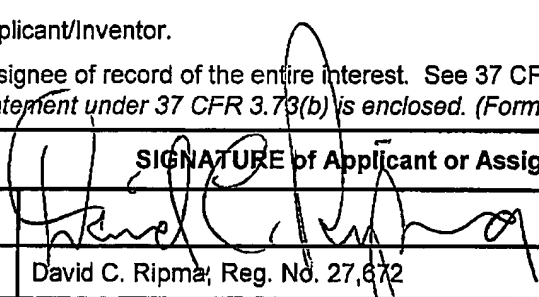
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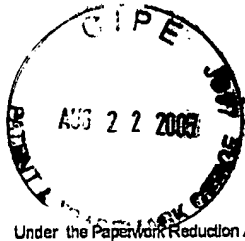
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/944,695
	Filing Date	August 31, 2001
	First Named Inventor	Sridhar Dathathraya
	Art Unit	2135
	Examiner Name	Leynna A. Ha
	Attorney Docket Number	SLA1055

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:				
<input type="checkbox"/> A Power of Attorney is submitted herewith.				
OR				
<input checked="" type="checkbox"/> I hereby appoint the practitioners at Customer Number : 55286				
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to:				
<input checked="" type="checkbox"/> The address associated with Customer Number: 55286				
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<input type="checkbox"/> Firm or Individual Name				
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I am the:				
<input type="checkbox"/> Applicant/Inventor.				
<input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. <i>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</i>				
SIGNATURE of Applicant or Assignee of Record				
Signature				
Name	David C. Ripma, Reg. No. 27,672			
Date	August 18, 2005	Telephone	360-834-8754	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
<input checked="" type="checkbox"/> *Total of ____ forms are submitted.				

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Sridhar Dathathraya

Application No./Patent No.: 09/944,695 Filed/Issue Date: August 31, 2001

Entitled: Telephone Providing Automatic Tracking of Calling Plan Charges

Sharp Laboratories of America, Inc., a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title, and interest
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012147, Frame 0316, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

David C. Ripma, Reg. No. 27,672
Signature

August 18, 2005
Date

360-834-8754
Telephone Number

Printed or Typed Name

Telephone Number

Patent Counsel

Title

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